Modified PTO/SB/30 (09-04)

Approved for use through 10/31/2002, OMB 0651-pg31
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REQUEST FOR

CONTINUED EXAMINATION (RCE) TRANSMITTA

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450



,, Application Number	09/913,583
Filing Date	August 16, 2001
First Named Inventor	REECE
Group Art Unit	2663
	NGO, Nguyen Hoang
Attorney Docket Number	36-1474

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1.	Subr	nission rec	uired und	ler 37 (C.F.R. § 1	1.114.					
	i. ii. iii o. 🔀 i. ii.	applicant of amendment of the control of the contro	does not wis nt(s). sider the sider the er d endment/F lavit(s)/De mation D	amend argume Reply eclaration	e previously ment(s)/r ents in the on(s)	r filed unen eply unde e Appeal	tered amendmen er 37 C.F.R. § Brief or Reply	t(s) entered, 1.116 pre	be entered unless app applicant must request eviously filed on viously filed on	t non-entry of s	uch
2.	<u> </u>										
	a. [o. [Suspens a period Other	sion of action on the above-identified application is requested under 35 C.F.R. § 1.103(c) for months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)								
3.	Fee	S The RCE	The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.								
.*/	a. ☐ Applicant claims "small entity" status. b. ☐ Fees are attached as calculated below: i. ☐ RCE fee required under 37 C.F.R. § 1.17(e) \$790.00 (1801)/\$395.00 (2801) \$ 790.00 ii. ☐ Petition is made to extend the due date 1 months (less 1 months previously paid) \$ iii. ☐ Other c. ☐ Check in the amount of \$ enclosed. d. ☐ Payment by credit card (credit card payment form attached) in the amount of \$ 790.00 e. ☒ The Director is hereby authorized to charge any deficiency in the fee(s) filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm), to Deposit Account No. 14-1140										
				SIGN	ATURE O	F APPLIC	ANT, ATTORI	IEY, OR A	GENT REQUIRED		
Name (Print Type) Chris Comuntzis Registration No. (Attorney/Agent) 31,097											
	ignatu		(/		12			Date	February 24, 200	06	00
CERTIFICATE OF MAILING OR TRANSMISSION											
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class hail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:											
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amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 146, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, Box RCE, P.O. Box 1450. Alexandria, VA 22313-1450 1450, Alexandria, VA 22313-1450,

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Atty Dkt. 36-1474

C# M#

REECE

TC/A.U.

2663

Serial No. 09/913,583

Examiner: NGO, Nguyen Hoang

Filed: August 16, 2001

Date: February 24, 2006

Title:

COMMUNICATIONS NETWORK

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ Correspondence Address Indication Form Attached.

Fees are attached as calculated below:

Total effective claims after amendment previously paid for 20

(at least 20) =

minus highest number

x \$50.00

\$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment (at least 3) =

3

minus highest number x \$200.00

\$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add

\$360.00 (1203)/\$180.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this

previously paid for

paper and attachment(s)

One Month Extension \$120.00 (1251)/\$60.00 (2251)

Two Month Extensions \$450.00 (1252)/\$225.00 (2252)

Three Month Extensions \$1020.00 (1253/\$510.00 (2253)

Four Month Extensions \$1590.00 (1254/\$795.00 (2254)

Five Month Extensions \$2160.00 (1255/\$1080.00 (2255) \$ 120.00

Terminal disclaimer enclosed, add

\$130.00 (1814)/ \$65.00 (2814) \$

Applicant claims "small entity" status.

Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee

\$180.00 (1806)

Assignment Recording Fee

\$40.00 (8021)

Other:

\$

TOTAL FEE ENCLOSED \$ 120.00

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

CC:vc

NIXON & VANDERHYE P.C.

By Atty: Chris Comuntzis, Reg. No. 31,097

Signature:

02/27/2006 LWONDIM1 00000048 09913583

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120.00 OP